

steps, and in circumstances such as you can hardly conceive where people would be inclined to do such a thing, but there is no law or statute in the land which would give you an excuse for doing it. And if you do it, you will be liable to a fine, and if you do it again, you will be liable to a fine, and if you do it a third time, you will be liable to a fine, and if you do it a fourth time, you will be liable to a fine, and if you do it a fifth time, you will be liable to a fine, and if you do it a sixth time, you will be liable to a fine, and if you do it a seventh time, you will be liable to a fine, and if you do it an eighth time, you will be liable to a fine, and if you do it a ninth time, you will be liable to a fine, and if you do it a tenth time, you will be liable to a fine, and if you do it an eleventh time, you will be liable to a fine, and if you do it a twelfth time, you will be liable to a fine, and if you do it a thirteenth time, you will be liable to a fine, and if you do it a fourteenth time, you will be liable to a fine, and if you do it a fifteenth time, you will be liable to a fine, and if you do it a sixteenth time, you will be liable to a fine, and if you do it a seventeenth time, you will be liable to a fine, and if you do it an eighteenth time, you will be liable to a fine, and if you do it a nineteenth time, you will be liable to a fine, and if you do it a twentieth time, you will be liable to a fine, and if you do it a twenty-first time, you will be liable to a fine, and if you do it a twenty-second time, you will be liable to a fine, and if you do it a twenty-third time, you will be liable to a fine, and if you do it a twenty-fourth time, you will be liable to a fine, and if you do it a twenty-fifth time, you will be liable to a fine, and if you do it a twenty-sixth time, you will be liable to a fine, and if you do it a twenty-seventh time, you will be liable to a fine, and if you do it a twenty-eighth time, you will be liable to a fine, and if you do it a twenty-ninth time, you will be liable to a fine, and if you do it a thirtieth time, you will be liable to a fine, and if you do it a thirty-first time, you will be liable to a fine, and if you do it a thirty-second time, you will be liable to a fine, and if you do it a thirty-third time, you will be liable to a fine, and if you do it a thirty-fourth time, you will be liable to a fine, and if you do it a thirty-fifth time, you will be liable to a fine, and if you do it a thirty-sixth time, you will be liable to a fine, and if you do it a thirty-seventh time, you will be liable to a fine, and if you do it a thirty-eighth time, you will be liable to a fine, and if you do it a thirty-ninth time, you will be liable to a fine, and if you do it a fortieth time, you will be liable to a fine, and if you do it a forty-first time, you will be liable to a fine, and if you do it a forty-second time, you will be liable to a fine, and if you do it a forty-third time, you will be liable to a fine, and if you do it a forty-fourth time, you will be liable to a fine, and if you do it a forty-fifth time, you will be liable to a fine, and if you do it a forty-sixth time, you will be liable to a fine, and if you do it a forty-seventh time, you will be liable to a fine, and if you do it a forty-eighth time, you will be liable to a fine, and if you do it a forty-ninth time, you will be liable to a fine, and if you do it a fifty-thousandth time, you will be liable to a fine.

BOSTON MEDICAL AND SURGICAL JOURNAL.

VOL. XLI.

WEDNESDAY, JANUARY 9, 1850.

No. 23.

DIVERSITIES OF HUMAN CHARACTER, AND DELICATE SHADES OF INSANITY—THEIR RELATION TO OFFENCES AND CRIMES.

[Concluded from page 485.]

In all these cases, a court of justice requires from a medical witness a positive opinion as to the state of the accused person at the time of committing the crime, and as to his having been able at the time to distinguish right from wrong. No absolute rule can be laid down for his guidance. Each case must be carefully considered by itself, with all its preceding and attending circumstances. No single test can be safely relied upon. There may have been delusion, or no delusion; premeditation and plan, or neither; apparent motive, or no apparent motive. Many insane people act from motives sufficiently apparent, and plan crimes with abundant premeditation, contrivance and cunning. They exercise these powers often without intending any crime, but in furtherance of some vague or insane object. A gentleman, an officer of engineers, confined in a private asylum near London, had for some time meditated escape. One day, when some workmen were in the house, he affected a particular interest in the construction of the lock of a door, and persuaded one of them to take it off for his inspection. He took it to pieces, put it together again, and volunteered to fix it again to the door, which he did, in a very workman-like manner; but he had first abstracted from the lock the portion of hard metal of which the use is to prevent the key from being turned too far backward. Soon afterwards he escaped from the asylum in the night; and much wonder was excited when it was found that he had managed to saw in two one of the iron bars by which the windows of his room had been, it was supposed, securely guarded. No one, not even the policeman, could conjecture how this was done. The patient was soon re-taken, and in his pocket was found the piece of metal which had been so useful to him, and which he explained that he had employed in sawing the bar through. Here were premeditation, contrivance, an object or motive, and all the quiet precaution of a reflecting man; yet the patient was so decidedly insane, that when he had effected his escape, his first step was, to proceed to Apsley house, where he announced himself as the Marquis of Wellesley.

Nor is the question of the prisoner's knowledge of right and wrong

always easily decided. There are not a few individuals in the world whose sense of right and wrong is always dull and incomplete. There are moral idiots. The affections are as imperfect or as wanting, in some human beings, as any of the faculties of the intellect are in others. Such an excuse for crimes cannot, it is evident, be admitted without danger, yet it sometimes exists, and in strict justice ought to be admitted.

But there are also insane persons, and not a few, who do know right from wrong, and yet who would do the wrong if permitted. They know that murder is wrong, yet they would kill certain persons if at large. It is most difficult, in some of these cases, to draw a distinction between insanity and crime. The question is raised, of course, in all such cases, as to their having retained that sense of right and wrong at the moment of committing the crime : and to decide on the extent to which an uncontrollable temper, or furious passion, has rendered them incapable of listening to the voice of reason and conscience is not easy.

In all these cases, each case must be judged by itself. The medical man's duty is to inquire most carefully into all the facts, and having formed his opinion, to pronounce it sincerely and fearlessly. He speaks as to the real psychological condition of the accused ; and with the consequences he has nothing to do. Society must do as it chooses with the question, or with the case, as a moral or social question, and deal with these cases as it thinks best. It is the painful and difficult duty of others to view these questions solely as legislators and defenders of society. Medical men must steadily view them as physicians, physiologists, psychologists, and not be scared away from what they know to be true, nor from declaring it.

Every separate circumstance requires to be weighed in relation to the particular case. In one case an habitually good character may be a ground of defence; in another, an habitually bad one. The parentage, the education, the early life, and the events of several years; the pursuits and habits of the patient; must all be considered.

Society is inconsistent and unjust in these cases; sometimes demanding a life with eager accents, and reviling those who prevent the execution; and at other times refusing to permit such precautions to be taken as might prevent the commission of a crime by a madman. Temporary excitement and social prejudices equally render justice difficult. A vain, foolish, mischievous youth, commits the outrage of firing a pistol loaded with powder at the Queen's carriage; or a man whose madness is incontestable, and who ought long before to have been in an asylum, commits murder, and the public outcry is for an execution. If a man in the humble walks of life were to accuse his wife of innumerable and impossible infidelities, and to attempt to wound her with a carving knife; if he were to assert that he communicated with spirits, and, imagining other persons to have secret influences over him, were to assault them, he would immediately be dealt with as a lunatic. If a rich man does all these things, noble and distinguished persons interfere to prevent his liberty being encroached upon. Yet if, during any controversy then arising, the rich man were to assassinate his wife, the plea of insanity would as eagerly be set up for him; he would certainly not be treated as a vulgar criminal, and hanged.

Those who animadver^t the most freely and frequently on the evidence of medical men in these cases have, I believe, given scarcely any attention to the actual question of responsibility in each case, or to the inconsistencies so often committed in relation to the care of the person and the property in such cases ; and the subject is far too extensive and too intricate to allow me to treat fully of it on the present occasion.

Within the last few years the frequency of juvenile crime has often suggested to reflecting men the possibility of the education accorded to the juvenile criminal being more efficiently applied to the juvenile part of our poorer population *before* their entrance on a career of crime. Leaving this question to those better able to decide it, I have no hesitation in saying, that there are to be found among children and youth many who, from an inherent proneness to criminal actions, ought to be constantly and carefully superintended and guarded. But the pride of families and the prejudices of the public equally forbid such salutary precaution. The result is, that crimes are committed which might have been prevented ; and when this result takes place, the virtuous indignation of the public knows no bounds : judges rejoice that juries find a verdict against a poor, miserable, diseased child ; and the newspapers dwell with a ferocious joy on the defeat of medical testimony.

To those to whom these lectures are addressed, what more I have to say on this part of the subject may seem but to be made up of truisms. Beyond these walls, the public voice condemns these truisms, or disregards them ; and a re-action against the humane spirit of the age, partly, it must be confessed, excused by the extraordinary prevalence of horrible crimes, prompts too visible a desire for the crowded scaffolds of half a century ago. But in that age—intellectually as dark as any since the creation of man—it seems to have been believed that every child, not an absolute idiot, was born with equal intellectual and moral capacity ; and by scholastic severities and public punishment pedagogues and legislators strove alike to balance apparent inequalities in talents and in morals ; and alike strove in vain.

More intelligent views now prevail. It is generally admitted, that where a child is always unreasonable, mischievous, and disposed to hurt itself or others, it must be considered insane. A case lately occurred at Brompton, in which a child had convulsions when three weeks old. At the age of 1 year, it was always restless and screaming, and pressing its hand to its forehead. At 2 years old it was continually endeavoring to tear its own face, or to push other children into the fire. At last this wretched child died in convulsions ; and the brain was found diseased, and there was a tuberculous abscess in the cerebellum. Less extreme cases are in all probability associated with less extensive disease, or with a general defect in the composition of the brain. There are instances, in which children, yet living, have several times attempted suicide. During the last year, the newspapers have contained an account of a murder committed by a boy 9 years of age, his little sister being the victim. The first and second plates in the Outlines of Lectures by Sir Alexander Morison represent a little girl, of 6 years of age, who was decidedly insane, but recovered after two years' illness. In all these cases disease may be fairly presumed.

Not long ago, a boy, not quite 12 years of age, took the life of his grandfather by mixing arsenic with the sugar which he knew he would take with his fruit after dinner. The crime itself, in one of such tender years, afforded at least a strong presumption of unsound mind. When visited in Newgate, this boy was found to be of stunted growth, with a downcast look, a face scarred with scrofula, and a manner indicative of indifference to his position and insensibility to his crime. He was, it appeared, the unhappy son of an intemperate and epileptic father, who had died insane. It was related by his family, that from childhood he had been mischievous beyond the limits of childish mischief, regardless of truth, insensible to reproach, and apparently incapable of remorse or shame. And thus he seemed still to be; careless of his situation, and unmoved by the near prospect of his trial, and of death itself.

The medical attendants of this boy's family had previously expressed their opinion that his mind was not sound. It was a case in which, if any physician connected with an asylum had been specially consulted respecting the bodily and mental character of the patient, he would have pronounced him to be faultily organized, diseased from birth, disposed to insanity, and requiring systematic education, and long-continued care. His intellect might be acute, but his moral sentiments were undeveloped, and his propensities, as he grew older, might be expected to become the governing powers of his actions. Evidence of this kind was, indeed, adduced at his trial, but it was entirely disregarded by the jury, and scoffed at by the judge, who declared that he rejoiced that a verdict of "guilty of murder" was returned, and the plea of a diseased brain scattered to the winds. The press applauded the judge, and covered the doctors with abuse. Yet, after all, the boy was not hanged, but sent to school to be improved. Such verdicts, and such judicial extravagance, are disgraceful to the present state of psychological knowledge. If the jury were right, and the triumph of the judge was just and decent, the boy ought to have been hanged high in the air. But not even the power of the press, ever echoing the prejudice of the time, could prevent the exercise of some greater power, by which the execution of an insane child was mercifully and justly prevented.

Such inconsistencies must shake the faith of every man in the legal view of these cases; and even the rapid and imperfect survey now made of the diversities, inequalities, and weaknesses of the mind, must show, I think, at least, that the relations of insanity and crime require a more dispassionate consideration than the public, or than legal functionaries, have lately, or ever, vouchsafed to them; and that the maxims of the law are not accordant with the natural phenomena of disordered states of mind actually leading to criminal actions, and therefore require revision. The time for this revision must come. Even those who are little affected by sentiments of compassion cannot always forget, that, on whatever vantage ground they stand in this life, yet for their conduct towards those accused of crime, as for all their conduct to their fellow creatures, they are responsible to a higher tribunal.

In the meantime, medical men ought not to shrink from these cases.

A wretch driven mad by poverty, or disappointment acting on a distempered brain, has no other friends in this world.

The same courage which causes the physician to brave the dangers of pestilence should support him in this duty, beneath the assault of pestilent tongues and pens. Not the voice of the people, calling for executions, nor the severities of the bench, frowning down psychological truth, should shake his purpose as an inquirer and a witness. His business is to declare the truth. Society must deal with the truth as it pleases.

Doubtless, in some cases, the difficulty of discovering the truth is extreme, or even of determining how far punishment may be justifiable or salutary, when a criminal is to a certain extent insane. But in the numerous gradations of intellect and feeling in different human beings, there must be a point, as we descend from the highest intellects towards the perfect idiot, at which responsibility ceases, and impunity begins. No one but God can determine this point in every case. The defect or imperfection may be in the whole character and intellect, or limited to parts of the intellect, and parts of the character only; and none can weigh and estimate this accurately but God, who made all men, and knoweth whereof they are made. Man presumes in vain to fix this point in every case. The natural and acquired defects of any individual, his temptations, his resistance, his strength and his weakness, and, therefore, his actual sinfulness and responsibility, can only be known to Him to whom all hearts are open, and from whom no secrets are hid. But, in our obscurity and doubt, we should carefully and seriously weigh each case; and, although anxious to protect society, never be induced to despise the evidence of truth, and the dictates of mercy.

CASE OF POISONING BY LAUDANUM TREATED BY BLEEDING.

BY JAMES S. HUGHES, M.D., F.R.C.S.I., SURGEON TO JERVIS-ST. HOSPITAL.

I WAS summoned to see (in conjunction with the late Dr. Kerin, and Messrs. Daly and Gorman of Henry street) a gentleman in the Londonderry Hotel, who was supposed to be dying of apoplexy. We found him lying in bed, on his back, in a state of insensibility, with stertorous breathing; pulse extremely rapid, scarcely to be felt; face leaden-colored; lips purple; pupils minutely contracted and fixed; extremities cold, and covered with a clammy perspiration. On throwing down the bed-clothes to examine him more minutely, a half-ounce empty bottle, labelled "laudanum," fell on the floor, and the only information we could obtain was, that the patient had spoken to one of the waiters on that morning, between 9 and 10 o'clock, at his bed-room door, dressed in his night-shirt, and that, suspicion being excited, at 5 o'clock the door was forced open, and he was found in bed in a state of insensibility. The stomach pump was immediately resorted to; the tube being introduced, an attempt was made to withdraw any fluid contained in the stomach, but it having been ascertained that there was no fluid in that viscus, water was injected into it, and withdrawn, in order to remove any solid material, if present; the fauces were irritated, and a twenty-grain solution of sulphate

Not long ago, a boy, not quite 12 years of age, took the life of his grandfather by mixing arsenic with the sugar which he knew he would take with his fruit after dinner. The crime itself, in one of such tender years, afforded at least a strong presumption of unsound mind. When visited in Newgate, this boy was found to be of stunted growth, with a downcast look, a face scarred with scrofula, and a manner indicative of indifference to his position and insensibility to his crime. He was, it appeared, the unhappy son of an intemperate and epileptic father, who had died insane. It was related by his family, that from childhood he had been mischievous beyond the limits of childish mischief, regardless of truth, insensible to reproach, and apparently incapable of remorse or shame. And thus he seemed still to be ; careless of his situation, and unmoved by the near prospect of his trial, and of death itself.

The medical attendants of this boy's family had previously expressed their opinion that his mind was not sound. It was a case in which, if any physician connected with an asylum had been specially consulted respecting the bodily and mental character of the patient, he would have pronounced him to be faultily organized, diseased from birth, disposed to insanity, and requiring systematic education, and long-continued care. His intellect might be acute, but his moral sentiments were undeveloped, and his propensities, as he grew older, might be expected to become the governing powers of his actions. Evidence of this kind was, indeed, adduced at his trial, but it was entirely disregarded by the jury, and scoffed at by the judge, who declared that he rejoiced that a verdict of " guilty of murder " was returned, and the plea of a diseased brain scattered to the winds. The press applauded the judge, and covered the doctors with abuse. Yet, after all, the boy was not hanged, but sent to school to be improved. Such verdicts, and such judicial extravagance, are disgraceful to the present state of psychological knowledge. If the jury were right, and the triumph of the judge was just and decent, the boy ought to have been hanged high in the air. But not even the power of the press, ever echoing the prejudice of the time, could prevent the exercise of some greater power, by which the execution of an insane child was mercifully and justly prevented.

Such inconsistencies must shake the faith of every man in the legal view of these cases ; and even the rapid and imperfect survey now made of the diversities, inequalities, and weaknesses of the mind, must show, I think, at least, that the relations of insanity and crime require a more dispassionate consideration than the public, or than legal functionaries, have lately, or ever, vouchsafed to them ; and that the maxims of the law are not accordant with the natural phenomena of disordered states of mind actually leading to criminal actions, and therefore require revision. The time for this revision must come. Even those who are little affected by sentiments of compassion cannot always forget, that, on whatever vantage ground they stand in this life, yet for their conduct towards those accused of crime, as for all their conduct to their fellow creatures, they are responsible to a higher tribunal.

In the meantime, medical men ought not to shrink from these cases.

A wretch driven mad by poverty, or disappointment acting on a distempered brain, has no other friends in this world.

The same courage which causes the physician to brave the dangers of pestilence should support him in this duty, beneath the assault of pestilent tongues and pens. Not the voice of the people, calling for executions, nor the severities of the bench, frowning down psychological truth, should shake his purpose as an inquirer and a witness. His business is to declare the truth. Society must deal with the truth as it pleases.

Doubtless, in some cases, the difficulty of discovering the truth is extreme, or even of determining how far punishment may be justifiable or salutary, when a criminal is to a certain extent insane. But in the numerous gradations of intellect and feeling in different human beings, there must be a point, as we descend from the highest intellects towards the perfect idiot, at which responsibility ceases, and impunity begins. No one but God can determine this point in every case. The defect or imperfection may be in the whole character and intellect, or limited to parts of the intellect, and parts of the character only; and none can weigh and estimate this accurately but God, who made all men, and knoweth whereof they are made. Man presumes in vain to fix this point in every case. The natural and acquired defects of any individual, his temptations, his resistance, his strength and his weakness, and, therefore, his actual sinfulness and responsibility, can only be known to Him to whom all hearts are open, and from whom no secrets are hid. But, in our obscurity and doubt, we should carefully and seriously weigh each case; and, although anxious to protect society, never be induced to despise the evidence of truth, and the dictates of mercy.

CASE OF POISONING BY LAUDANUM TREATED BY BLEEDING.

BY JAMES S. HUGHES, M.D., F.R.C.S.I., SURGEON TO JERVIS-ST. HOSPITAL.

I WAS summoned to see (in conjunction with the late Dr. Kerin, and Messrs. Daly and Gorman of Henry street) a gentleman in the Londonderry Hotel, who was supposed to be dying of apoplexy. We found him lying in bed, on his back, in a state of insensibility, with stertorous breathing; pulse extremely rapid, scarcely to be felt; face leaden-colored; lips purple; pupils minutely contracted and fixed; extremities cold, and covered with a clammy perspiration. On throwing down the bed-clothes to examine him more minutely, a half-ounce empty bottle, labelled "laudanum," fell on the floor, and the only information we could obtain was, that the patient had spoken to one of the waiters on that morning, between 9 and 10 o'clock, at his bed-room door, dressed in his night-shirt, and that, suspicion being excited, at 5 o'clock the door was forced open, and he was found in bed in a state of insensibility. The stomach pump was immediately resorted to; the tube being introduced, an attempt was made to withdraw any fluid contained in the stomach, but it having been ascertained that there was no fluid in that viscus, water was injected into it, and withdrawn, in order to remove any solid material, if present; the fauces were irritated, and a twenty-grain solution of sulphate

of zinc was injected through the tube, and repeated after a short interval, without producing emesis. Sinapis were applied to the calves of the legs, together with heaters and turpentine frictions to the extremities, by which means the temperature was slightly elevated, and the pulse became fuller. Cold affusion to the head was next resorted to, with a view of taking off the pressure from the brain by unloading the vessels, which were turgid, but without effect. The patient appeared to be sinking, the coma becoming more profound, and the breathing more and more stertorous. On considering the history of the case, and the probability that the laudanum had been swallowed immediately after the patient had returned to his bed-room in the morning, and that, if so, full time for the absorption of the poison had elapsed, and viewing the patient as sinking under cerebral congestion, as evinced by the great turgescence of the vessels of the head and neck, together with the stertorous breathing, we determined to try the effects of bloodletting, and for this purpose the left temporal artery was opened, the blood from which at first merely trickled down, being very dark-colored and thick, but after a few seconds a jet of arterial-colored blood sprang forth, *immediately* on which the patient gave a deep sigh. Vomiting, with the expulsion of a small quantity of fluid containing a little indigested matter, devoid of taste and smell, and mixed up with mucus, ensued; his pulse became fuller, and less frequent; sensibility returned, and his countenance rapidly improved. We had him then walked up and down, between two stout porters, through the long corridors, the men being relieved from time to time, for we found it of vital importance to keep him in forcible and active motion, for if he was left to himself for a moment, stertorous breathing and a state of somnolency ensued. Brandy punch and hot coffee were given to him at short intervals. The drowsiness continued for over twenty-four hours after he came under our observation, during which period he was kept in a roused state, and the stimulants were continued.

This gentleman perfectly recovered, and when convalescent made the following statement. He said that, some time before the attempt to poison himself, he had determined to commit suicide, provided he did not receive a favorable answer to a letter which he had addressed to a high official officer in this city; and that, with a view of carrying out that intention, he went to a house in Sackville street, where he asked for one ounce of laudanum, but that, as he admitted that he was not in the habit of using it, the gentleman he addressed very properly refused to give it to him. He passed on to a shop in an adjoining street, and, being then on his guard, said he wanted half an ounce of laudanum, and told the shop-man that, as he was in the habit of taking it, he wished to have the strongest in the house: the man, not suspecting anything wrong, gave it to him. He then returned to his hotel, went to bed, and having gone out on the following morning, in his night-dress, to the landing at his bed-room door, to inquire after the expected letter, and having been informed by the waiter that no such letter had been left at the hotel, he went back to his room, and, having locked the door, returned to his bed and swallowed the half ounce of laudanum, after

which he soon became insensible. Thus upwards of seven hours must have elapsed, from the time of taking the poison till the alarm was given. In a physiological point of view, the result of the abstraction of blood was highly interesting, for the instant the congested brain was relieved, and thereby enabled to receive impressions, and not till then, vomiting ensued, the result of reflex action, the stertorous breathing ceased, and the patient was restored to his senses. From the details of this case there can be no doubt that, by the timely use of the lancet, the patient was snatched from the most appalling of deaths, viz., that by suicide.

That the propriety of having recourse to bleeding in the advanced stage of poisoning by opium, when accompanied by symptoms of cerebral congestion, is based on scientific principles, and has the sanction of the highest authority, it is only necessary to refer to the works of Orfila, Christison and Taylor; but as I know, from the treatment of more cases than one of poisoning by opium in the advanced stage, which have come to my knowledge, and in which there was evidence of congestion of the brain, that the value of this measure has been occasionally overlooked, principally from the fear of still further promoting absorption, I have been induced to record the foregoing case, which occurred some time since, as it illustrates the marked success which may follow the adoption of bloodletting in *suitable* cases of poisoning by opium or its preparations. That depletion does favor the process of absorption in the early stages of poisoning, is now generally admitted; but we must hold in mind, that a time may come when absorption has been carried to its full extent, and when the patient is sinking from congestion of the brain; and it is in this particular stage, when after emptying the stomach of its contents, that bloodletting is not only justifiable, but imperatively demanded. Dr. Christison, when alluding to the treatment of poisoning by opium, says that, "venesection has been recommended, and successfully used by some physicians. If the stomach be emptied, and the patient kept roused, as may almost always be done when means are resorted to in time, venesection will be unnecessary; however, when the pulse is full and strong, it may be prudent to withdraw blood, and it certainly appears that, in most cases where this remedy has been employed, the sensibility began to appear almost immediately after." And Mr. Taylor, in his recent work on poisons, when referring to bloodletting in poisoning by opium, states that, "bleeding should not be resorted to until *after* the poison has been completely removed from the stomach, as the abstraction of blood acts injuriously by tending to promote absorption; it is indeed only justifiable when, during the second stage, there is a strong, full pulse, with symptoms indicative of cerebral congestion. If the pulse should become feeble and sink after the abstraction of a small quantity of blood, the operation should be carried no farther." The following case of poisoning by laudanum, in which bleeding was followed by immediate relief, is so full of interest, that I think it worthy of a place here. It is published by Dr. Richardson, in the Edinburgh Medical and Surgical Journal, Vol. XVII., page 226:—

"An unfortunate female, when in a carriage with a friend, swallowed

laudanum ; the action was observed, and she was conveyed by her terrified companion, in about half an hour afterwards, to the house of the practitioner under whose care the author studied ; she was taken out in a state nearly insensible. Ten grains of vitriolated zinc were instantly administered without relief; ten more were added in a few minutes afterwards, and other means were in vain resorted to, to excite the action of vomiting, as the comatose symptoms continued evidently to increase ; a vein was opened, and nearly twenty ounces of blood taken away ; sense and motion *immediately* began to return, the emetic action of the zinc was produced, and the patient was left in a short time afterwards with no other remaining symptom of the danger she had escaped from, than a little languor."—*Dublin Quarterly Jour. of Med. Science.*

CASE OF SPONTANEOUS HYDROPHOBIA.

DR. CONDIE presented to the College of Physicians of Philadelphia the outlines of a case of spontaneous hydrophobia. The person in whom it occurred, was a man of the name of Willets, an overseer in the ship-yard of Simpson & Neill, Southwark, about 35 years of age, and of robust and active, temperate habits. He had enjoyed, previously, uninterrupted health, being unable to recollect an attack of any severe sickness, excepting a short convulsive paroxysm with which he had been seized several years ago. On Tuesday evening, August 27th, he went home in his usual health. The ensuing morning, on awaking from sleep, he experienced a stiffness along the left side of the neck, and a sense of numbness in the arm of that side ; this he attributed to exposure on the preceding night, during a sudden change in the temperature of the air. Dr. T. S. Reed was applied to, who directed an appropriate treatment, which, however, did not abate the symptoms under which the patient labored. He soon began to complain of pain extending from the occiput along the left side of the neck and body to the epigastrium. Feeling thirsty, he took a tumbler of water in his hand, but on attempting to swallow some, was seized with a most painful sense of suffocation, followed instantly by a general spasm ; which, however, continued only a few minutes. A sinapism was applied to the nape of the neck, and a large teaspoonful of laudanum was given, and repeated after an interval of two hours. The patient slept none. During the whole of Wednesday night he was tormented with an urgent thirst, which induced him to attempt to swallow water, but every time the attempt was made, the sense of suffocation and the spasms recurred. Dr. C. saw the patient, with Dr. Reed, at noon on the 29th of August. He found him in a constant state of jactitation ; his eyes had a peculiar wild, suspicious look ; his tongue was moist, and slightly coated along its centre, with a yellowish mucus ; it was somewhat pointed and red at its edges ; his skin was cool and moist. He complained of a pain commencing on the left side of his neck and extending down the side of his body, with a sense of weight or constriction at the epigastrium. He answered the questions put to him correctly, but in a quick, sharp tone of voice. He complained of intense thirst, but every time he at-

tempted to drink, he was seized with the most agonizing sense of suffocation. To show me the manner in which it affected him, he seized a glass of water which stood upon the bureau in his room, and by a sudden jerking motion, brought it to his lips ; on attempting to swallow a few drops, he became violently convulsed ; threw his limbs about in a wild, agitated manner ; his eyes staring wildly open ; his face assuming a dark hue, and his whole chest heaving as of one in the agony of suffocation. During the paroxysm his pulse was contracted, hard and frequent, but immediately upon its close it became more developed, soft, and slow ; the face, at the same time, lost its flush, and the forehead became covered with a profuse perspiration. As soon as the paroxysm, which lasted only for a few minutes, ceased, the patient became perfectly rational, but continued in a state of constant rapid motion, getting up and lying down—first on one side, then on the other ; and ejecting, every few minutes, from his mouth, with great force, and every time in a different direction over the room, a small portion of thick, frothy saliva. There was no redness nor swelling of the fauces, nor was any pain or uneasiness excited by pressure upon the throat or epigastrium. As the patient lay upon his back, I took up a fan unperceived by him, and with it gently agitated the air over his face ; he was immediately seized with the same convulsive paroxysm as on attempting to swallow fluids, but less intense, and of shorter duration. The mention and sight of water caused, he said, a sense of constriction in the throat, and a peculiar, indescribable dread. The air blew directly upon him, through an open window, at the side of his bed ; this caused him no uneasiness, it was rather, he declared, agreeable to him. Bodies in motion, as the waiving of the window curtain, or the agitation of the trees seen from his room, produced no effect upon him. He declared that he had never been bitten by a dog, nor had, for the last eighteen years, received any wound or contusion. Upon a minute examination of his body, no cicatrix could be discovered. He attributed the symptoms under which he was laboring, to his having become overheated while working in the sun, and then chilled in consequence of a sudden change in the temperature of the air. He was directed Dover's powder in scruple doses, to be repeated at short intervals, and half drachm doses of chloroform. A blister was applied to the nape of the neck, and an active cathartic was administered. But a very small portion of the medicine was taken, as every attempt to swallow brought on instantly a sense of impending suffocation, and a violent paroxysm of convulsions. Towards the latter part of the day the patient became very much agitated, wandered over the house, and offered violence to those who attempted to restrain him. In the evening he was more calm, and took some bread soaked in tea, the swallowing of which was attended with only slight difficulty. He now complained of pain at the top of his head ; the whole head felt hot ; there was a slight injection of the eyes ; the pulse was full and firm. Cold applications were directed to his head, and his feet were immersed in hot mustard water. Blood to the amount of twelve or fourteen ounces was taken from his arm, when his pulse sunk and he soon after fainted. He now became more tranquil ; the inability to drink fluids still, however, continued.

Early on the morning of the 30th, he died ; his death being unpreceded by coma and unattended by convulsions. No *post-mortem* examination could be obtained.

After his death a report was circulated that the patient had been bitten by a pup he was handling, which subsequently died : but upon investigation, this report was found to be unsupported by any satisfactory evidence of the fact. It was unquestionably a case of spontaneous hydrophobia.—*Transactions of the Philadelphia College of Physicians.*

POST-MORTEM APPEARANCES OF A CASE OF AORTIC ANEURISM.

BY WILLIAM BARRETT, M.B., MEDICAL STAFF, SOREL.

ON the 30th September, at 8, P. M., I was called for the first time, to visit Mr. T., æt. 37, who was supposed to be laboring under hypertrophy of the heart for three years—and for some time past had been in the habit of treating himself with opium, he having ceased to derive relief from every other means. He was suffering severe pain as of a "burning heavy weight," in the left hypochondriac and cardiac regions, sitting in an easy chair, his body partially inclined forwards, with but little clothing ; temperature natural, except of the hands and feet, which were rather cold and clammy ; pulse 96, feeble, but alike in both wrists ; occasional hiccup and bilious vomiting ; not the least dyspnoea, cough, palpitation, dysphagia, haemoptysis or haematemesis during the whole progress of his disease ; there was no dropsical effusion ; countenance expressive of extreme suffering, but its color, as usual, florid and healthy ; pain referred at times to the right hypochondrium.

As he had suffered frequently from paroxysms apparently similar to that above stated, which were subdued by anodynes, two pills of calomel, opium and hyoscyamus, were prescribed, in addition to the usual dose of morphia.

Oct. 1.—He was sitting in his easy chair, without having had sleep, but having experienced relief at intervals ; countenance indicating the influence of opium : upon further investigation of the case, being informed that he had at times suffered from pain in the back, feeling of numbness, and neuralgia in the arms and fingers, such an examination of the chest was made as the circumstances of the case did then admit of.

The pulsation of the heart was observed to extend more beyond the mesial line than natural, and its action more distinctly audible in the right than left side of the thorax, no abnormal sound, however, existing ; respiration clear, but rather more feeble on the left side, while percussion was alike and natural on both sides ; posteriorly, the only symptom which attracted attention was the preternatural resonance of the voice along the dorsal interscapular region. He had taken twelve grains of morphia during the last twenty-four hours ; an anodyne liniment, with belladonna and a mixture of camphor, sulph. ether, morphia and digitalis, were prescribed. On former occasions counter-irritation had not produced any beneficial result.

2d.—During the previous day and night he experienced considerable relief, until 5 o'clock, A. M., when his suffering became continued and aggravated. His bowels were copiously moved twice this morning, which, with the exertion of going to the night's chair, produced syncope; after the lapse of three hours, he rallied from this state by the aid of stimulants internally, and heat applied to the extremities. The inhalation of chloroform, in small quantity, was tried as an experiment for the relief of his sufferings, which continued unmitigated, as also its internal administration in conjunction with camphor and ether. About 2½ o'clock, P. M., he suddenly called to a friend who was sitting in his room, and, in a paroxysm of torture, sprang to his feet, but immediately fell, apparently dead. However, having been lifted into bed, re-action again returned partially in half an hour, and it was remarkable to witness the expression of horror evinced when conscious of his lying in bed, and the instinctive effort made to regain the upright position in the easy chair. He now began to complain of dyspnoea, and foreseeing the early approach of death, took leave of his friends, retaining consciousness, and suffering pain, until almost the last moment of his existence, which terminated as if in a faint, at 4½ o'clock, P. M.

Post-mortem Appearances.—No emaciation of the body or extremities. The liver healthy, but pale. Gall-bladder contracted, filled with gall-stones and a small quantity of viscid, colorless fluid; one of the gallstones was partially in the duct, and the surface corresponding abraded or ulcerated. *Thorax.*—Heart occupied a position to the right of the mesial line, its structure perfectly healthy, size normal, and its cavities empty. Pericardium contained a small quantity of serum. The left pleural cavity was filled with serum, and a recent coagulum, the left lung being completely compressed. The posterior mediastinum was occupied by an aneurism of the thoracic aorta, which extended from the 4th to 9th dorsal vertebrae, the bodies of those intervening having been absorbed by pressure to a very great extent. Laterally, the tumor projected chiefly into the left pleural cavity, into which the blood had escaped, a rent in the pleura having occurred near the upper edge of the root of the lung. Here, also, its parietes were thinnest, and the contents fluid, while at the right side the tumor was hard and solid, from the existence of fibrinous coagula. The arch of the aorta was dilated, and contained several ossific deposits; in its ascending portion, a "well" shaped dilatation, about the size of a walnut, existed. The aneurism appeared to have been formed originally of the entire coats of the aorta, which at the origin of the tumor was of its natural calibre, but not retaining its elasticity, was rigid and thickened.

Previous History.—The subject of this disease was a gentleman of most temperate habits; for a short time commander of one of the Montreal and Quebec steamboats. The prominent and almost only symptoms, from the commencement to the termination, comprising a period of three years, may be termed "angina pectoris." For two years he had been unable to lie horizontally; many of his days and most of his nights having been spent sitting in an arm chair. The only remedy which afforded relief was opium—which latterly he took with unsparing liberality.—*British Am. Jour. of Med. and Physical Sciences.*

ON THE NUTRITIVE PROPERTIES OF FISH OIL.

BY ROBERT DRUITT, LONDON.

OF the virtues of cod-liver oil there can be now no question ;—and it seems capable of doing two things. In the first place it fattens, and adds to the bulk of the body : and, in the second place, it gives nutrition a better turn, as it were : it makes the fluids and solids healthier as well as bulkier, and enables them to throw off a variety of cachectic derangements. These useful qualities have been partially accounted for on the supposition that they are due to a minute quantity of some biliary principle contained in the oil. This supposition seemed to me extremely improbable, especially on considering the numerous adulterations to which the oil was liable ; and accordingly I determined on making a few experiments on the subject, the results of which follow.

For this purpose I applied to my oilman for some specimens of the purest and sweetest lamp oil, and procured several varieties of whale and seal oil, decidedly fishy and rank in flavor, but not rancid or oxydized or putrescent. In fact, the flavor of the oil commonly called "southern oil," the produce of the black whale, which I chiefly employed, is not disagreeable to any one who is free from fancies on the subject ; and if mixed with three or four parts of almond oil, is not a whit more offensive to the taste than the common *oleum jecoris aselli*.

CASE I. and II.—Two brothers, S., aged 3 and 5, flabby pasty children, each suffering from pustular eruption on the head and face. A wound made on the head of one of them a week since had degenerated into a flabby sore. No deficiency of food. Both took a teaspoonful of seal oil three times a day in lemonade. Their mother reports that they were excessively fond of their medicine ; they took it for a fortnight, when the skin of each was quite healthy, and complexion clear.

III.—J. W., a pale, unhealthy child, aged $2\frac{1}{2}$ years ; subject to pustular eruptions on the face. Cured by the same dose of southern oil, thrice daily for a week. Cured far more readily than on former occasions by calomel. Likes the oil extremely.

IV.—J. L., a miserable child ; glands in neck greatly enlarged ; purulent discharge from ears ; abdomen swelled and hard. This child got better under the use of seal oil, but did not take it regularly enough to make the case of any value.

V.—J. E., aged 2, subject to skin disease from birth ; his mother has had syphilis ; his complexion peculiarly pasty and sallow. Took southern oil in the above doses for a month. Greatly improved in flesh and complexion ; but at the end of the course had an attack of eczema in the arms.

VI.—W., $\text{æt. } 30$; subject to sciatica. Took the southern oil ; is certain that it has done him much good.

VII.—J. W., $\text{æt. } 36$. Was largely bled for acute rheumatism a twelvemonth since. Has never recovered flesh or strength, and is racked with pains in the back and shoulders. Took cod-liver oil for a month with benefit last May ; left it off during the summer ; became thinner and weaker. Took southern oil in the dose of two drachms thrice daily for

three weeks; likes it much; feels stronger, and looks as decidedly fatter and better in condition as he did from the cod-liver oil.

VIII.—Mrs. P., suffered from puerperal mania whilst suckling, last autumn; has continued anaemic and despondent; has taken every form of mineral and vegetable tonic with temporary benefit. Took southern oil for three weeks; is unmistakeably plumper, clearer in complexion, and in better spirits.

IX.—J. M., a sallow child, æt. 4, took the southern oil for a week, for impetiginous eruptions on the face and legs. The improvement in flesh and clearness of complexion was extraordinary, and the eruption nearly disappeared.

These few cases do not prove much; but, so far as they go, are satisfactory. No one who had seen the children above mentioned before and after their course of oil, could doubt that a most beneficial change had been wrought by something. The great delight which the little wretches took in their dose is another point worth noticing. I would therefore suggest, that it is well worth while to make a fair experiment on a large scale, to determine whether it is fish oil in general that does good, or only the oil of the cod's liver. If, as I believe, almost any kind of fish oil will answer the purpose, then many of the poor will be able to use the cheaper kinds, who could not afford the nicer, but more costly cod-liver oil.—*London Medical Gazette.*

FOREIGN SUBSTANCES IN THE STOMACH.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR.—That the human stomach, like charity, beareth all things, or *almost* all, is well known both to you and your readers. And yet there are some who may not know the full extent of its power of endurance *in every direction*. To such the following statement of facts, collected on the spot, from persons who were either eye-witnesses in the case, or were well and truly informed, will not be wholly devoid of interest.

Yours truly, Wm. A. ALCOTT.

Some three years since, a young woman, about twenty years of age, who worked in the cotton factory at Whitinsville, in this State, after having been for a long time pale, weak, and diseased in the stomach, was obliged to leave the factory and call for a physician. He found her without appetite, and greatly emaciated—great pain and suffering in the stomach.

On inquiry by her physician, Dr. Robbins, she stated that for several years, while laboring in the cotton mill, she had been accustomed to bite off threads, which it was necessary to remove, in the process of performing her task, and swallow them. Believing that an accumulation of this cotton in the stomach might be the cause of her suffering, Dr. R. gave her an emetic. By this and other means he succeeded in procuring from her stomach a quantity of cotton, which, when dried, weighed **FOUR OUNCES**. Rev. Mr. Clark, of Whitinsville, who saw the cotton and saw it weighed, observed, "There was cotton enough to fill my hat half full."

TREATMENT OF MILK ABSCESS.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—In the October No. of your Journal, I find an article from the New Jersey Medical Reporter, on "Milk Abscess," by Dr. Parrish. The writer has gone over a variety of methods of treatment, and arrives at the conclusion that ung. of tobacco is the most reliable. He alludes to the vinegar treatment of Dewees, in connection with cupping, blood-letting, &c. &c. I must say that I feel very much like sustaining the Old Professor. I, in common with Dr. P., have been greatly annoyed with milk abscess in days gone by, and must confess that Dewees did not carry his stimulant, diaphoretic treatment far enough. For the last half-dozen years I have not seen a milk abscess in my practice, although I have seen quite a large number of inflammations, that bid fair for abscess. My treatment consists in the local application of vinegar, as *hot* as the patient can bear it, and the exhibition of pulv. Dov. 15 grs. once in two hours, until narcotism is induced, then in less quantities or at longer intervals. I have *invariably* found, that so soon as a perspiration is induced, the pain and intumescence subside, and suppuration is prevented. So much confidence have I in this method of treatment, that I as certainly look for a cure, as I do the arrest of a tertian with quinine. I move the bowels the following day, but use at the time no cathartic, or in fact any other medicine. My success may be in part owing to the pulv. Dov., but I regard the *hot vinegar* as of great utility.

Rossville, Ohio, Dec. 26, 1849.

W. H. SCOBERRY.

NEW PREPARATION OF OPIUM

To the Editor of the Boston Medical and Surgical Journal.

SIR,—If the following is worthy of a place in your valuable Journal, you may insert it; if not, let it remain *sub umbra*. It was prepared for the last meeting of the Suffolk County Medical Society (after the subject of opium had been pretty freely and learnedly discussed at the previous meeting), but was not read, as other business pressed.

Some three years since, I saw, in the Dublin Medical Press, a statement from Dr. Nichol, that he had made, and used in his practice, and also given to some of his friends, who also had used the same, what he called "*Muriate of Opium*." Their testimony was, that it was far preferable to any other solution or preparation of opium. Having tried the acetate and sulphate of morphia and the common tincture of opium, and that prepared by citric, tartaric, sulphuric, and almost all the other acids, they found all these leave the patient with headache, constipation, and many other unpleasant symptoms; but the *muriate of opium* answered all the indications of that drug, and left none of the unpleasant sensations. Dr. Nichol's formula was the following:—R. Pulv. opium, 1 oz.; muriatic acid, 1 oz.; distilled water, xx. oz.; mix. Macerate (often shaking the liquid) for fourteen days. Strain and filter. The dose was from twenty to forty drops, according as circumstances should indicate—not varying much from the tinct. opii.

I tried this preparation, and found it answer the description. Out of twenty persons who took it, none complained of *headache* or *unpleasant sequences*. But it was not of a good color, and soon grew *muddy*, and seemed to be decomposed. I therefore made some modifications of the preparation, until I fixed upon the following formula, which answers admirably, and makes and *retains* the beautifully red and clear form of that which I herewith send you. I use no other preparation of opium, except the powdered gum in diseases of the bowels. R. Pulv. gum opii, ʒ i.; muriatic acid, ʒ i.; distilled water, ʒ xvi.; red brandy, ʒ iv. Mix, &c. It is of nearly the strength of the *tincture of opium*, and, I think, much preferable to that or McMunn's elixir.

Boston, Dec. 29, 1849.

W. M. CORNELL.

TILDENS' MEDICINAL EXTRACTS.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—I wish to call the attention of the readers of your valuable Journal to the Medicinal Extracts prepared by Messrs. Tildens, of New Lebanon, Columbia Co., N. Y. I have used their extracts for some time, and I can say with confidence that they possess a far greater uniformity of strength, or active properties, than any I have ever used. Their extracts and inspissated juice are evaporated at a uniform temperature, not exceeding 120° of Fahrenheit, and with surprising rapidity. These gentlemen avail themselves of the increasing resources of chemical science, in the process by which they secure some of the most valuable and reliable articles now in use by the medical profession. To illustrate the efficacy of these extracts, I will mention one that I recently used in a bad case of *phlegmnia alba dolens puerperarum*.

This patient, in 1844, suffered with a similar complaint. She then took some of the preparations of opium, to relieve pain and procure rest, &c. During her recent illness, I kept her almost constantly under the influence of Tilden's Extract of *Lactuca Sativa*, given in doses of from two to four grains, and repeated once in four hours, during the most painful stage of the disease. Her sufferings were nothing in comparison to those of her former attack, and her convalescence was much more rapid.

I am now using this article with success in many cases in which I formerly gave opium. There are some cases in which it is difficult or impossible to dispense wholly with opium, yet I doubt not that a good preparation of *lactuca sativa* will be found far preferable in most cases in which opium is administered. I have used the preparation of *lactuca* alluded to, in a variety of painful affections, and with success.

The New York Journal of Medicine, for November, 1849, on page 417, alludes to Tildens' Extracts, and to letters received from Professor Clark, of New York city, and Dr. Campbell, of Pittsfield, Mass., in which these medicinal agents are favorably noticed.

Respectfully, &c. JOSEPH BATES.

New Lebanon Springs, Dec. 31, 1849.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, JANUARY 9, 1850.

Increase in the Medical Profession.—There is evidently an apprehension in the minds of some, that the practice of medicine in the United States will lose all its pecuniary value, at the present rate of increase in the medical ranks. It is admitted that fees are not so readily collected as they formerly were in the country. Adventurers are numerous, who pretend to be physicians, but who really know nothing of the business in which they are profitably engaged. Many foreigners are practising among us, some of whom are well qualified practitioners, but many consider this a superior and excellent country for carrying on the grossest deception. If they only speak broken English, charge high, and boast lustily of their position and extensive influence at home, they find that their fortune is secured here. Our own native-born citizens cannot compete with them, among certain classes, who are strongly in favor of having knowledge, like souchong tea, far-fetched and dear-bought. Our schools of medicine will graduate annually, from twelve to fifteen hundred practitioners—which, in connection with the increasing emigration of persons who announce themselves medical men, on their arrival, having ascertained the national weakness to patronize strangers, furnishes good grounds for fearing an overstock of physicians. When the next national census is taken, the statistical tables will doubtless lead to the supposition that this is an alarmingly sickly country, to give employment to such a vast body of practitioners; or else that the people are laboring under an hallucination of universal prevalence, in sustaining an army of ignorant charlatans, mountebanks and quacks.

Medical School of Maine.—On the 13th of February, the lectures will commence at Bowdoin College, Brunswick, and continue fourteen weeks. This school has always maintained a good reputation, from the day of its organization, and the medical gentlemen who have been graduated in it doctors of medicine, as a general rule, exhibit eminent qualifications for the practice of a laborious and honorable profession. Those who matriculate at the Maine school of medicine cannot slip or slide through, but must pass an ordeal that puts beyond question their fitness for the detailed business of physicians and surgeons. It is creditable to the State, in an age of radicalism and legalized empiricism, when charters for granting diplomas to broomsticks might be had for asking—as if to show the low estimate in which the most learned in medicine are held by certain law-makers—that no legislative encouragement has been offered to those institutions, which in other States are striving to break down and destroy the dignity of medical science. On former occasions we have freely adverted to the causes which have appeared to us to prevent the Maine school from exerting a larger circle of influence. For doing so, some very frothy emanations of pugnacity were forwarded by bellicose correspondents, who conceived that the object of our remarks was to injure that College, that one nearer home might be benefited thereby. But since no man in his

senses could be so narrow-sighted as to believe in such a small kind of trickery, it is quite unnecessary to explain in full the reasons for having asserted that there might be more medical students educated in Maine. One reason, however, we will repeat. If a resident faculty were created, and especially if the professor of surgery resided in Brunswick, the lame, halt and blind, instead of wending their way to Boston and New York, would seek the advice of their own great oracles. Surgical operations would become frequent, and students in increased numbers would gather around such a nucleus. However, it is not worth while to enlarge on the benefits of a plan that may seem impracticable to those who are averse to all changes. Certain it is, however, that the period must arrive when a board of trustees will be open to conviction in regard to the true policy to be pursued, and then the now excellent school of Maine will shine with more brilliancy and effect than has yet characterized its course.

Ovariotomy.—Through a country paper, intelligence is brought of an important surgical operation by Dr. Deane, of Greenfield, Mass., two weeks since, in the removal, says the account, "of an enormous ovarian tumor. The patient was a lady in South Hadley. Some idea of the enormous size of this tumor may be formed, when it is stated that thirty-seven pounds of water were taken from it, at one time, a few weeks before it was removed. The operation was performed while the patient was under the influence of chloroform, and occupied in all about half an hour. The incision necessary to be made, was over twelve inches long, and of course it laid open all the internal viscera of the abdomen. The morning after the operation, she was quite comfortable, and the prospect was fair that she would recover. This operation has been performed once before by Dr. Deane, with success; and once by Dr. Samuel Parkman, of Boston. The statistics of surgery show that only about half of these cases recover."

Dr. Bigelow's patient, referred to last week, died, on the Tuesday following the operation. A formidable operation was never more skilfully and admirably performed. If untiring zeal could have saved the patient, she would have lived, as no effort was wanting on the part of the surgeon. The particulars of both these cases, are preparing, it is presumed, for publication.

Principles of Human Physiology.—Such have been the extraordinary advances of science within the last few years, that it is by no means remarkable some have come to the conclusion that but little more remains to be discovered. But however this may be with regard to geography, geology and astronomy, it is certain that physiology still offers problems for solution. The little that is positively known of the laws of life, is an evidence of the limited insight which we have into the operations of nature, as connected with our own bodies. It is as difficult to ascertain how life begins, as it ever was; and its maintenance, through the instrumentality of the feeble yet complicated system of mechanism in the lowest as well as highest forms of animal organization, continues to surprise, astonish and confound the wisest of philosophers. But because there are difficulties in conducting physiological investigations, no one should be discouraged, and therefore abandon the pursuit, with the unwelcome idea that nothing remains for investigation worth laboring for, since grand discoveries are doubtless destined to crown the enterprise of vigilant, persevering inquirers.

These reflections were called up by reading the fourth edition of "The Principles of Human Physiology, with their chief applications to pathology, hygiene and forensic medicine, by William B. Carpenter, M.D., of the London University, with extensive additions and improvements by the author,"—a compact, elegant octavo volume, containing over 700 pages, in the best style of Messrs. Lea & Blanchard, the Philadelphia publishers. In this edition, some alterations will be perceived which particularly refer to the nervous system, and the subject of generation. Dr. Carpenter's own investigations have induced him to relinquish certain favorite doctrines on the former subject, and substitute others more consistent, as he believes, with the constitution of the cerebro-spinal centres. On generation, Bischoff's doctrine, with respect to the development of the ovum, is introduced, instead of Dr. Barry's. The work, exceedingly elaborate in its character, and comprehensive beyond any other of recent date, is brought to a close by an appendix, which is devoted to phrenology, and artificial somnambulism and mesmerism. Although this has been read with eagerness, coming as it does from one of the great teachers of the age, we were somewhat disappointed in the results at which he finally arrives. Phrenologists will defend their premises, and, if possible, reconcile the difficulties Dr. Carpenter discovers. They will certainly feel under no special obligation to him for throwing obstructions under the wheels of a car that has been moving on without interruption for a long while, although creating far less enthusiasm than when under the guidance of those unrivalled mental engineers, Messrs. Gall and Spurzheim. With regard to animal magnetism, fearing that we may not have clearly understood him, it is preferred that the advocates of the latest and most ridiculous of impositions should have the whole of the discourse to themselves. If they find comfort in it, it will show that the elements of some kinds of comfort may actually be found for them in a book on physiology.

Finally, this work is an admirable one, and those who would understand what is meant by progressive knowledge, in a branch of study that, more than almost any other, leads one to look through nature up to nature's God, should avail themselves of the learned disquisitions of Dr. Carpenter.

Alcohol for preparing Medicines.—A small pamphlet, written in a spirit complimentary to the medical profession for the strong and straight-forward assistance which has invariably been given by its members to the temperance reformation, agitates the subject of preparing remedies without alcohol. Can this article be dispensed with entirely, and prescriptions be framed equally efficacious? Certain it is there were centuries in which alcohol was unknown, and the measure of health was quite equal to that of any subsequent epoch during which it has figured so largely in the pharmacopœias. Does the use of tinctures have a tendency to create a morbid appetite for distilled liquors? This is a question open for discussion. In the mean while the influence of physicians should always be exerted in favor of unqualified temperance, as a prerequisite for unimpaired health.

Harrisburg (Penn.) Lunatic Asylum.—The Key Stone newspaper furnishes the following observations on the progress and architecture of a new edifice now being erected at Harrisburg. "The work upon this immense structure has been expedited with an energy almost unprecedented. In

April the corner stone was laid, and on the first of this month the roof was nearly completed. This is rapid progress upon a building presenting a front of five hundred feet, averaging about four stories. A few pleasant days will serve to complete the wing towers and the dome upon the centre. The design of the building presents a combined variety, which gives to the whole a most imposing effect. It will be, when finished, a perfect gem in architecture, without an equal in the United States. Mr. Haviland will make enduring reputation by erecting this splendid monument of art, combining as it does the most effective architectural beauties with an admirable adaptation to the objects of its construction. The work has been executed under the immediate direction of Mr. Wells, who has evinced great energy and taste in giving sublime form and substance to the idea of the designer.

Mortality of Boston in 1849.—The annual abstract of deaths in this city the last year has not yet, we believe, been published. It is understood, however, that the total number during the year was about 5300, including the stillbirths. For a population of 130,000, this is 1 in 24.53, or a fraction over 4 per cent. The number is about 1000 greater than last year; which addition is accounted for by the prevalence of cholera in the city, and the great fatality, especially among our foreign population, of the usual summer complaints.

Boylston Medical Society.—The following gentlemen have been elected officers of the Boylston Medical Society of Harvard University, for the present year.

President, W. H. Thorndike, M.D., Boston. *Trustees*, Drs. John Ware, George Hayward, G. C. Shattuck, John Homans, Jacob Bigelow, J. B. S. Jackson, Z. B. Adams. *Vice-President*, Richard M. Hodges, Jr., Cambridge. *Librarian*, Albert H. Blanchard, Boston. *Secretary*, Edward Hitchcock, Jr., Amherst. *Committee on Prizes*, Drs. Winslow Lewis, Jr., Charles Gordon, H. J. Bigelow, A. A. Gould, Samuel Parkman.

The number of students attending the medical lectures at the Castleton (Vt.) School, the last autumnal session, was 83; graduates, 29.

To CORRESPONDENTS.—A letter from Dr. Briggs, dated at the New Mormon City, Great Salt Lake, will appear next week; also, a communication in regard to new apparatus for lateral curvature of the spine, and Dr. J. P. Alden's case of separation of bones of the pelvis.

MARRIED.—At Winchester, Conn., Dr. James D. Edmond to Miss M. E. Shattock.—David B. Nelson, M.D., of Manchester, N. H., to Miss S. C. Weston.

DIED.—At Northampton, Samuel B. Woodward, M.D., 63, long and favorably known as the Medical Superintendent of the Lunatic Hospital at Worcester, Mass. A memoir of his life is solicited for the Journal.—At Kalamazoo, Michigan, Moses Cobb, M.D., formerly of Springfield, Vt., 65.

Deaths in Boston—for the week ending Saturday noon, January 5, 79.—Males, 41—females, 38. Accidental, 2—disease of the bowels, 2—disease of the brain, 1—bronchitis, 1—disease of the brain, 1—disease of the brain, 1—cyanosis, 1—consumption, 12—cholera infantum, 1—croup, 1—cancer, 1—dysentery, 3—dropsy, 1—dropsy of brain, 1—delirium tremens, 1—erysipelas, 3—typhus fever, 1—typhoid fever, 1—lung fever, 7—hooping cough, 1—disease of heart, 2—intemperance, 1—infantile diseases, 10—disease of the lungs, 6—disease of the liver, 2—marasmus, 2—old age, 2—palsy, 1—pleurisy, 1—smallpox, 5—disease of the stomach, 1—teething, 2—tumor, 1—unknown, 1.

Under 5 years, 41—between 5 and 20 years, 8—between 20 and 40 years, 15—between 40 and 60 years, 5—over 60 years, 10. Americans, 40; foreigners and children of foreigners, 39.

On a Case of Death from the Use of a Tobacco Enema. By PETER EADE, Esq., M.B., M.R.C.S., &c., Blofield.—F. B.—, aged 18, an hysterical-looking girl, not having had any evacuation from the bowels for some considerable period, and various remedies, as well as repeated enemas, having failed to produce any effect, was persuaded by friend, who stated to her that she had derived the greatest advantage from such treatment, to have a tobacco clyster administered. For this purpose, about three drachms of common shag tobacco were boiled in a pint of water, and injected into the bowel. In about half an hour after this, she complained of faintness and feeling sick, and in half an hour more became quite collapsed, with cold sweats; vomited; was slightly convulsed; and she died in about half an hour, being an hour and a half from the time of the injection being administered.

Post-mortem examination, thirty-six hours afterwards.—The body presented no remarkable appearance externally. *Head*.—Not examined. *Chest*.—Lungs normal in every respect; no fluid in the pericardium, but the heart itself remarkably flaccid; so much so, that when laid upon the table, it quite collapsed, and became almost as flat as an empty stomach in the same situation. All its cavities very empty, but in each of the ventricles from two to three drachms of fluid black blood. *Abdomen*.—Liver presented no unusual appearance; stomach contained several ounces of semi-fluid food. Intestines examined for nearly their whole length; duodenum and jejunum empty; ileum contained some semi-fluid faeces; colon empty, and rather distended with gas. No redness or trace of inflammation visible in any part of the canal, and no smell of tobacco perceptible in the abdomen or any part of the body.—*London Lancet*.

The Sacredness of Medicine.—“I may seem to you to strangely overstate the matter, when I speak of medicine as aiming at the realization of immortality for man. Yet this assuredly is the abstract or ideal claim of our profession. On this earth the fundamental idea of our calling is never realized. Every patient of every physician dies, and every physician in turn becomes a patient and dies too. All that the minister of the body succeeds in effecting is the adjourning of the day of death, the postponement of the inevitable hour. Practically he fights against pain rather than against death, regarding the latter as unavoidable, and seeking only to delay its arrival, and to lessen its pangs. Yet the spirit in which the physician labors is assuredly that of regarding death *not* as an invincible foe. He may believe, as a man, that death will conquer, but, as a physician, he stands over his patient to fight the great enemy to the last, as if there might be one exception, if but one, to the otherwise universal law. And if no exception ever occurs, if the physician is invariably defeated, the conclusion to be drawn from his discomfiture is not that his hope of success was delusive, but that he erred in expecting its fulfilment in this world. Let but a life beyond the grave be admitted, and an immortality both of soul and of body be believed in, and the Christian physician, at least, can anticipate with certainty the full realization of the fundamental idea of his high calling.”—*Lecture of Dr. G. Wilson, Edinburgh*.

New Medical Books in London.—On Stricture of the Urethra and Fistula in Perineo. By James Syne, F.R.S.E.—On Tic Doloureux, and other Affections of the Nerves. By Dr. Downing.